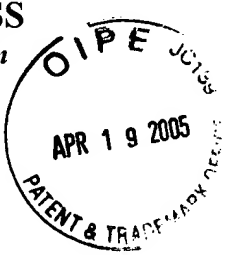


CHANGE OF CORRESPONDENCE ADDRESS	
<b>Application</b>  Address to: Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450  	Application Number
	Filing Date
	First Named Inventor
	Art Unit
	Examiner Name
	Attorney Docket Number

09/382,621

August 25, 1999

D.C. Reed et al.

2126

Li B. Zhen

TUC919990034US1

Please change the Correspondence Address for the above-identified patent application to:

☒ Customer Number: 33595

OR

<input type="checkbox"/> Firm or Individual Name				
Address				
Address				
City		State		Zip
Country				
Telephone		Fax		

This form cannot be used to change the data associated with a Customer Number. To change the data associated with an existing Customer Number use "Request for Customer Number Data Change" (PTO/SB/124)

I am the:

- ☐ Applicant/Inventor
- ☐ Assignee of Record of the entire interest.  
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)
- ☒ Attorney or Agent of Record. Registration Number Registration No. 39,867.
- ☐ Registered practitioner named in the application transmittal letter in an application without an executed oath or declaration. See 37 CFR 1.33(a)(1). Registration Number \_\_\_\_\_.

Typed or Printed Name David W. Victor

Signature 

Date

March 16, 2005

Telephone

(310) 553-7977

Note: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.\*

☒ \*Total of 1 form is submitted.